

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	6 minus 20 =	*
INDEPENDENT CLAIMS	1 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	355

RATE	FEE
BASIC FEE	710.00
X\$18=	
X80=	
+270=	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN  
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

(Column 1)

(Column 2)

(Column 3)

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

BEST AVAILABLE COPY

(Column 1)

(Column 2)

(Column 3)

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**	=
	Independent	*	Minus	***	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>				

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY  
It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/622493

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	Total
Sm./Lg.				Sm. Entry	Lg. Entry	
Basic Filing Fee	<u>201/101</u>			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<u>355</u>
Total Claims > 20	<u>203/103</u>	<u>6</u> - 20 =	<input checked="" type="checkbox"/>			
Independent Claims > 3	<u>202/102</u>	<u>1</u> - 3 =	<input checked="" type="checkbox"/>			
Multi. Dep Claim Present	<u>204/104</u>					
Surcharge	<u>205/105</u>					
English Translation	<u>139</u>					

### TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 355

Less Filing Fees Submitted - \$ 345

BALANCE DUE = \$ 10.00

Office of Initial Patent Examination

Figure 7